## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

135718

|  |  | CLAIMS AS                       | FILED -  <br>(Column |                                 | Column 2)     |          | Small en<br>Type [ | ITITY<br>□             | OR     | OTHER<br>SMALL | 19                     |       |
|--|--|---------------------------------|----------------------|---------------------------------|---------------|----------|--------------------|------------------------|--------|----------------|------------------------|-------|
| TOTAL CLAIMS   |  |                                 | 14                   |                                 | ,             |          | RATE               | FEE                    |        | RATE           | FEE                    |       |
| FOR  |  |                                 | NUMBER FILED         |                                 | NUMBER EXTRA  |          | BASIC FEE          | 370.00                 | OR     | BASIC FEE      | 740.00                 |       |
| TOTAL CHARGEABLE CLAIMS  |  |                                 | l'( min              |                                 |               | X\$ 9=   |                    | OR                     | X\$18= |                |                        |       |
| INDEPENDENT CLAIMS   |  |                                 | う mir                |                                 |               | X42=     |                    | OR                     | X84=   |                |                        |       |
| MU   | LTIPLE DEPEN   | DENT CLAIM PR                   | RESENT               |                                 |               | +140=    |                    | OR                     | +280=  |                |                        |       |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |                                 |                      |                                 |               |          | TOTAL              |                        | OR     | TOTAL          | 740                    |       |
| Claims as amended - Part II  |  |                                 |                      |                                 |               |          | OTHER THAN         |                        |        |                |                        |       |
|  |  | (Column 1)<br>CLAIMS            | 1                    | (Column 2                       | 2) (Column 3) | า        | SMALL              |                        | OR     | SWALL          |                        |       |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT | Allan<br>Hara        | NUMBER<br>PREVIOUSI<br>PAID FOR | LY EXTRA      |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE           | ADDI-<br>TIONAL<br>FEE |       |
|  | Total  | <b>*</b>                        | Minus                | **                              | =             |          | X\$ 9=             |                        | OR     | X\$18=         |                        |       |
|  | Independent  | *                               | Minus                | ййй                             | =             |          | X42=               | 1                      | OR     | X84=           |                        |       |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |                      |                                 |               |          | +140=              | И.                     |        | +280=          |                        | 100   |
|  |  |                                 |                      |                                 |               |          | TOTAL              |                        | OR     | TOTAL          |                        |       |
|  |  |                                 |                      |                                 |               |          | ADDIT. FEE         | <u> </u>               | OR     | ADDIT. FEE     |                        |       |
|  | ) isa asa  | (Column 1)                      | Total and the f      | (Column<br>HIGHEST              |               | <u>)</u> |                    |                        | ก      |                | 1                      |       |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT |                      | NUMBER<br>PREVIOUS<br>PAID FOR  | PRESENT EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE           | ADDI-<br>TIONAL<br>FEE | AVAIL |
|  | Total  | *                               | Minus                | ##                              | =             |          | X\$ 9=             |                        | OR     | X\$18=         |                        |       |
|  | Independent  | *                               | Minus                | <del>û û û</del>                | =             |          | X42=               |                        | OR     | X84=           |                        |       |
| 8  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |                      |                                 |               |          | +140=              |                        | OR     |                |                        |       |
|  |  |                                 |                      |                                 |               |          | TOTAL              | ] <u> </u>             | OR     | TOTAL          | ][<br>[]               |       |
|  |  |                                 |                      |                                 |               |          | ADDIT. FEE         | <u> </u>               |        | ADDIT. FE      | =                      |       |
|  | 1  | (Column 1)                      | 7                    | (Column                         |               | )        | <del></del>        |                        | ล      | <del></del>    | · ·                    |       |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT |                      | NUMBEF<br>PREVIOUS<br>PAID FOI  | PRESENT EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE           | ADDI-<br>TIONAL<br>FEE | .     |
| <b>FO S</b>  | Total  | *                               | Minus                | **                              | =             |          | X\$ 9=             |                        | OR     | X\$18=         |                        |       |
| NAGE (   | Independent  | *                               | Minus                | ***                             | =             |          | X42=               |                        | OR     | X84=           |                        | 1     |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |                                 |                      |                                 |               |          |                    |                        | 1      |                |                        | 1     |
|  | If the entry in sele   | ımp 1 io loop then t            | he entry in cal-     | ımn 2 write "O'                 | ' in column 3 |          | +140=              |                        | OR     | L              |                        | 4     |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                 |                      |                                 |               |          |                    |                        |        |                |                        |       |